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## BIB DATA SHEET

CONFIRMATION NO. 6126

SERIAL NUMBER	FILING or 371(c) DATE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO.		
10/523,479	09/16/2005	435	1632	110313.138US2		
<b>RULE</b>						
<b>APPLICANTS</b> Magdalene M. Moran, Brookline, MA; Jayhong A. Chong, Brookline, MA; Ian Scott Ramsey, Jamaica Plain, MA; David E. Clapham, Wellesley, MA;						
<b>** CONTINUING DATA *****</b> This application is a 371 of PCT/US03/24432 08/04/2003 which claims benefit of 60/401,863 08/07/2002						
<b>** FOREIGN APPLICATIONS *****</b>						
<b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** ** SMALL ENTITY **</b> 08/08/2006						
Foreign Priority claimed 35 USC 119(a-d) conditions met Verified and Acknowledged	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No /DAVID A. MONTANARI/ Examiner's signature	<input type="checkbox"/> Met after Allowance Initials	<b>STATE OR COUNTRY</b>  MA	<b>SHEETS DRAWINGS</b>  2	<b>TOTAL CLAIMS</b>  74	<b>INDEPENDENT CLAIMS</b>  25
<b>ADDRESS</b> WILMERHALE/BOSTON 60 STATE STREET BOSTON, MA 02109 UNITED STATES						
<b>TITLE</b> Tissue specific genes and gene clusters						
<b>FILING FEE RECEIVED</b> 4065	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:			<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		